

Purpose of this Feedback Policy

This policy explains how Eastern Melbourne PHN (EMPHN) handles feedback; underpinned by the Department of Health's Primary Health Networks Program Complaints Policy 2018 and its guiding principles.

Scope

This policy applies to feedback EMPHN receives; from members of the public, EMPHN employees, contractors, consultants, government employees, service providers or stakeholders.

Feedback includes compliments, responses, suggestions or complaints; and can be verbal or written, formal or informal and includes the option to provide feedback anonymously.

What's not covered: evaluations of projects or activities of commissioned services, staff performance-related feedback, workplace grievances or occupational health and safety concerns.

Principles underpinning this Feedback Policy

EMPHN welcomes feedback – from the community, the health sector, our stakeholders and our team members. Everyone has the right to provide feedback, and we take feedback and the feedback process seriously – the organisation is committed to treating each instance of feedback on its own merits; impartially, confidentially and transparently.

This policy and our feedback mechanisms can be easily accessed on the <u>EMPHN website</u> and also via our internal systems, including the feedback function on our intranet.

Lodging feedback

Anyone who wants to provide feedback to EMPHN can submit it on our website. Your comments will be handled confidentially, and you also have the option of remaining anonymous.

However, the website is not the only option – we welcome your feedback in whatever format is best for you. For current team members who prefer to provide feedback internally:

- Speak to or email your manager
- Speak to or email your executive director
- Speak to or email HR
- Use the feedback function on our internal intranet
- Use the feedback mechanisms within TICKIT, the CLMS or CRM

Stakeholders and community members are always welcome to speak to or email your EMPHN contact.

Version number 1.0



To report serious concerns such as unethical conduct, you can lodge a whistleblower report. Make sure you read our <u>Whistleblower Policy</u> before filing a report to ensure your concerns are covered and that you are eligible for protection under the policy and relevant legislation.

You can also lodge a complaint about EMPHN, or another PHN, directly with the Department of Health, according to its <u>Primary Health Networks Program Complaints Policy</u> 2018 if there is:

- Suspected fraud against the Commonwealth by a funded organisation
- Misuse of Commonwealth funds or assets purchased with Commonwealth funds
- Non-compliance with the terms and conditions of the funding agreement with the Commonwealth
- Inappropriate or poor handling of conflicts of interest
- Breaches of privacy
- Complaints about the outcome of a departmental assessment

Feedback recording and collating

Feedback received by EMPHN – regardless of how it is received – must be entered into the TICKIT system. For feedback providers who want to maintain anonymity, enter your comments via the publicly-facing EMPHN website, which does not require personal details if you don't want to provide them.

The feedback review process

How EMPHN addresses feedback

Once received, feedback is logged and recorded in our Feedback Register. All feedback is followedup internally. Compliments are forwarded to the appropriate team managers and posted on our intranet, complaints are investigated and addressed, and both complaints and suggestions go to support our continuous improvement focus.

Specifically, complaints are handled according to the principles in the Department of Health's Primary Health Networks Program Complaints Policy 2018; assessed on their merit, and addressed fairly and objectively.

Complaints are escalated immediately to the Executive Director of the relevant business area, as well as to the Executive Director of Governance, Risk and Compliance if:

- there is a real or perceived conflict of interest
- a complaint is in relation to a manager's (or senior person within EMPHN) conduct
- a complaint involves a risk assessed as moderate or above
- there is an allegation of misconduct, or unethical or illegal activity
- there is a reputational risk to EMPHN, its programs or the Primary Health Network program
- a complaint has not been resolved at the previous level
- the issue affects the financial viability of EMPHN

Where appropriate, the Executive Director of Governance, Risk and Compliance will escalate serious concerns raised via feedback to the Executive Leadership Team and, if there is a notifiable issue, will escalate to the Department of Health.



Communicating the outcome

Every feedback provider who provides their contact details receives an acknowledgement and thanks. For feedback that requires further investigation or follow up, you will receive a call or email within 2 weeks to outline the investigation progress and next steps. Given differences in the nature, complexity and urgency of different feedback topics, it is difficult to predict how long a complaint will take to fully resolve, however, an EMPHN team member will keep you informed of what is being done.

Reporting and looping feedback for continuous improvement

All feedback is collated in a quarterly report (with an annual report that includes all feedback from each of the 4 quarters for easy reference), based on inputs via EMPHN's website, TICKIT and the CLMS, by the Quality Lead within the Governance, Risk and Compliance purview.

The Executive Director of Governance, Risk and Compliance oversees the Feedback Register and reports to the Executive Leadership Team each quarter, highlighting trends and themes or concerns.

The Quality, Risk and Safety Steering Team also review the feedback reports to consider relevance for that team's quality projects and the Quality Action Plan and the Audit Series.

The feedback reports are effectively collated consultation – and as such, they must be leveraged to make changes to how we do things at EMPHN. Where it appears trends are emerging, further investigation may be required. The Executive Director of each business area is responsible for ensuring sufficient understanding of the trends emerging from the reports, and that the intelligence gained is being wrapped back into EMPHN's processes and systems within their own areas.

Feedback results should precipitate better team dialogue and must inform:

- decision-making
- program planning, monitoring and evaluation activities
- drafting or amendment of policies and procedures
- audience, content and focus of learning and development programs
- targets and focus of community consultations

Where to get help?

- For general enquiries, contact: policies@emphn.org.au
- For enquires about this Feedback Policy, contact: the Executive Director Governance, Risk and Compliance: <u>nadia.marsh@emphn.org.au</u>
- Complete the feedback form on our website to let us know if you have any suggestions for how this policy could be improved, want to make a complaint, or even tell us what you like about this or any of our policies.

Related policies

Whistleblower Policy

Code of Conduct

Version number 1.0



Appendix 1 – Legislation and best practice guidelines

The legislative context used for this policy by EMPHN includes:

- Department of Health Primary Health Networks Program Complaints Policy 2018
- Delivering high-quality healthcare: Victorian Clinical Governance Framework, 2017
- Victorian Health Incident Management Policy, 2011 Including Sentinel Event Program
- Victorian Health Incident Management Policy Guide, 2011
- Corporations Act 2001
- Australian Charities and Not for-Profits Commission (ACNC) Guidelines

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Appendix 2 – Definitions

Term	Definition
Feedback	Complaints, improvement opportunities or compliments from members of the
	public, EMPHN employees, contractors, consultants or government employees.
Complaint	An expression of dissatisfaction with any aspect of EMPHN's activities that
	requires a review, and where appropriate facilitates a resolution
Compliment	An expression of satisfaction with any aspect of EMPHN's activities.
Improvement	Suggestions about processes that might be conducted differently to affect
opportunities	better outcomes. Where these suggestions are recognised as applicable, useful
	and appropriate, they may be implemented immediately, or logged to inform
	the next scheduled review of a particular process.

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